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UNITED NATIONS POPULATION FUND

Draft country programme document for Papua New Guinea

Proposed UNFPA assistance:	$11.5 million: $5.5 million from regular resources and $6 million through co-financing modalities and/or other, including regular, resources
Programme period:	Five years (2008-2012)
Cycle of assistance:	Fourth
Category per decision 2005/13:	A

Proposed assistance by core programme area (in millions of $):

	Regular resources	Other	Total
Reproductive health	3.0	3.5	6.5
Population and development	1.5	2.0	3.5
Gender	0.5	0.5	1.0
Programme coordination and assistance	0.5	--	0.5
Total	5.5	6.0	11.5

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I. Situation analysis

1. The population of Papua New Guinea, estimated at 6.1 million in 2006, is projected to reach 7.5 million by 2015. The annual population growth rate is between 2.3 per cent and 2.7 per cent. The total fertility rate is 4.6 children per woman, with rates as high as 6.5 children per woman in some provinces. The contraceptive prevalence rate is 20 per cent for modern methods, and the unmet need for family planning is 29 per cent. There are wide variations in demographic and health conditions across the 20 provinces of the country, which consists of a mainland and islands.

2. Forty per cent of the population is younger than 18. The number of young people entering the labour market is expected to grow steadily over the coming decade, adding urgency to government efforts to create economic opportunities. The pregnancy rate among 15- to 19-year-olds is high (70 births per 1,000 women), and is higher in rural areas than in urban areas. Reproductive health services for adolescents are limited.

3. Sexually transmitted infections, including HIV/AIDS, are a growing concern. The adult HIV prevalence rate is estimated at 1.7 per cent, and the number of HIV-positive persons is growing at the rate of 33 per cent per year. Young people and women are particularly vulnerable. Surveillance is inadequate, and information on the scale and distribution of the epidemic is limited.

4. The health sector is hampered by inadequate infrastructure, a lack of basic equipment, a shortage of trained personnel and weak referral systems. Access to and utilization of reproductive health services are low. Only 38 per cent of deliveries are attended by skilled personnel, a decline from over 50 per cent a decade ago. The maternal mortality ratio is high, at 370 deaths per 100,000 live births, rising to 650 deaths per 100,000 live births in some regions. Life expectancy at birth is 54 years for males and 55 for females.

5. Gender disparities are marked. Women hold few elected positions in local government, and there is only one female parliamentarian. Women are disadvantaged by low educational levels, illiteracy and limited access to paid work. In many communities, women are not free to exercise their sexual and reproductive rights. Gender-based violence is common. According to a recent study, 68 per cent of women live in violent homes, with the figure as high as 90 per cent in some highland provinces.

6. Per capita income growth has been negligible over the past decade, although an economic recovery is under way. Thirty per cent of the population is living in poverty. The national poverty reduction and Millennium Development Goal targets are incorporated into the government medium-term development strategy, which seeks to achieve a 10 per cent reduction in the number of poor people by 2015.

7. The national population policy (2000-2010) incorporates the goals and principles of the Programme of Action of the International Conference on Population and Development (ICPD), but implementation of the policy has been slow. A decentralized system of planning and budgeting introduced in the 1990s has not improved the quality of basic social services. Key challenges include the need for good governance, political stability, accountability and the rule of law. There is also a need to build the institutional capacity of line ministries and subnational governments to improve basic health, education and social protection services, especially for vulnerable groups.

II. Past cooperation and lessons learned

8. UNFPA assistance to Papua New Guinea began in 1979. The goal of the previous country programme was to improve the quality of life for the population by improving

reproductive health and enhancing the leadership and management of the national population programme.

9. The country programme helped to implement the national population policy by supporting national population policy action plans in 11 of 20 provinces. The programme incorporated population issues in the medium-term development strategy, as well as population education in the curriculum of primary schools. The Government is developing a population education curriculum for secondary schools. The programme also supported the 2006 demographic and health survey.

10. The country programme helped to improve reproductive health services in four provinces by training health personnel and strengthening reproductive health commodity security. The programme also developed protocols to treat victims of gender-based violence, and reviewed legislation in relation to the Convention on the Elimination of All Forms of Discrimination against Women. Peer-education programmes for university students and church youth leaders improved knowledge and awareness of reproductive health issues.

11. Lessons learned included: (a) a joint programme approach by the United Nations is needed to support national plans, strategies and programmes and to enhance the national capacity to address the deteriorating health infrastructure and the lack of trained human resources; (b) there is a need to improve monitoring to identify and manage implementation problems; and (c) support is needed to sustain a long-term political commitment to integrate population issues into provincial and district plans.

III. Proposed programme

12. The fourth country programme is derived from: (a) the common document elaborated by the United Nations country team in Papua New Guinea; (b) the medium-term development strategy; (c) the national population policy; (d) the national health plan (2000-2010); (e) the Millennium Development Goals; and (f) the ICPD Programme of Action. The common document provides the overarching framework for United Nations activities for the next five years.

13. The priority areas in the common document are: (a) governance and crisis management; (b) foundations for human development (health, education and child protection); (c) sustainable livelihoods and population; (d) gender; and (e) HIV/AIDS. The UNFPA country programme focuses assistance on areas of the common document where UNFPA has a comparative advantage. The goal of the UNFPA country programme is to contribute to nationhood and poverty eradication by improving the reproductive health status of the population and by enhancing the capacity of all levels of the Government to implement a multisectoral population programme. Areas for joint programming include HIV/AIDS, gender, Millennium Development Goal monitoring and humanitarian response.

14. The UNFPA country programme will contribute to achieving five outcomes of the common document elaborated by the United Nations country team, which are: (a) the Government implements governance and crisis management policies and strategies; (b) children, youth, women and men benefit from basic, high-quality health, education and social protection services; (c) rural communities in selected provinces of each region use improved and sustainable livelihood practices; (d) women and girls experience less gender inequality; and (e) the rate of HIV/AIDS infection is reduced or halted, with the Government providing services to those affected by HIV/AIDS.

Reproductive health component

15. The outcome of this component is: comprehensive, high-quality sexual and reproductive health information and services, including HIV/AIDS prevention services, will be available to and used by greater numbers of women, men, adolescents and youth. This

outcome responds to national priorities as outlined in the safe motherhood, neonatal and reproductive health strategy; the national HIV/AIDS strategy; the national health plan; the medium-term development strategy; and the national population policy. Two outputs contribute to this outcome.

16. Output 1: Increased availability of comprehensive reproductive health services, particularly family planning, emergency obstetric care, antenatal care, prevention of sexually transmitted infections and HIV/AIDS, and adolescent-friendly health services in selected districts and provincial hospitals. The programme will achieve this output by helping national and provincial departments of health to: (a) increase the number of facilities providing essential and emergency obstetric care; (b) increase the number of mothers delivering in properly equipped health facilities with skilled birth attendants; (c) strengthen reproductive health commodity security and improve family planning services; and (d) increase coverage for antenatal and post-natal care. The programme will strengthen emergency referral systems that link rural health centres with provincial hospitals. It will also develop an adolescent reproductive health strategy, introducing information and services for adolescents in health centres and communities.

17. Output 2: Increased awareness and understanding among adolescents and youth of reproductive health and population issues. The programme will achieve this output by supporting the phased implementation of the population education curriculum in secondary schools. In addition, the programme will introduce population and reproductive health issues into the formal teacher training programme. The programme will expand peer-education programmes to universities and secondary schools in selected areas and will use behaviour change communication strategies to reach adolescents and youth. It will also develop partnerships with religious, cultural and civil society institutions to deliver culturally appropriate messages to young people.

Population and development component

18. The outcome of this component is: the three levels of Government (national, provincial and district) fully implement the national population policy, with population issues reflected in planning and monitoring documents. Included under this outcome is a review and revision of the current national population policy. Three outputs will contribute to this outcome.

19. Output 1: Increased availability of policy-oriented and disaggregated population, gender and reproductive health data and research results for evidence-based policy formulation. The programme will achieve this output by supporting a policy analysis of the 2006 demographic and health survey, as well as providing support to the 2010 population and housing census. The programme will also provide technical support to strengthen the capacity for population research.

20. Output 2: Strengthened institutional and technical capacity of national and subnational planning units to integrate population dimensions into development frameworks and to support the implementation of population and reproductive health policies and programmes. The programme will build technical capacity at national, provincial and district levels in order to integrate population dimensions into key national and decentralized development strategies, including the medium-term development strategy; the second national Millennium Development Goal report; and district development plans. A focus of technical capacity-building will be to provide support to review and revise the national population policy. The programme will support the efforts of the National Population Council to manage, monitor and promote the national population, gender and reproductive health programmes. The programme will strengthen the capacity of the secretariat of the National Population Council to enable it to: (a) provide timely information, assessments and policy options to the National Population Council; and (b)

facilitate the leadership role of the Council in the population field.

Gender component

21. The outcome of the gender component is: institutional mechanisms are strengthened to address key gender issues, with a focus on gender-based violence; gender stereotyping in schools and in the labour force; and implementation of the Convention on the Elimination of All Forms of Discrimination against Women. Two outputs will contribute to this outcome.

22. Output 1: Strengthened capacity of the Government and non-governmental organizations (NGOs) to formulate, revise and implement gender policies, programmes and action plans. The programme will achieve this output by strengthening the capacity of the Office for the Development of Women in the Department for Community Development, in order to review the national women's policy; prepare a national gender policy; and formulate a national programme of action to reduce sexual and gender-based violence. The programme will provide support to the National Council of Women to: (a) review the legislation under which the Council operates; (b) develop a strategic plan of action; and (c) strengthen networks with youth groups and civil society organizations. The programme will also strengthen relevant government departments and NGOs to implement the Convention on the Elimination of All Forms of Discrimination against Women and other gender-related international agreements.

23. Output 2: Effective mechanisms established to address gender-based violence and gender inequality and discrimination, and to promote women's empowerment. The programme will achieve this output by supporting a review of advocacy materials and by developing communication tools to support advocacy and behaviour change communication strategies. The programme will review and enhance the capacity of key institutions, including law enforcement agencies and medical facilities, to respond to gender-based violence and to gender discrimination and inequality. It will also support research on the determinants of gender-based violence and will help to develop evidence-based policies and action plans.

IV. Programme management, monitoring and evaluation

24. The Aid Coordination and Management Branch of the Department of National Planning and Monitoring will coordinate the UNFPA country programme, which government agencies and national NGOs will implement. The country programme is an integral part of the common document elaborated by the United Nations country team in Papua New Guinea.

25. The country programme will employ a results-based management approach, aligning its monitoring and evaluation efforts with the UNFPA multi-year funding framework, and the monitoring plan of the common document elaborated by the United Nations country team. The Government and UNFPA will conduct baseline and end-of-programme surveys in key programme areas.

26. The UNFPA country office in Papua New Guinea consists of a representative, an assistant representative and support staff. UNFPA will earmark programme funds for two national programme officers within the framework of the approved country office typology. UNFPA will employ national project personnel to strengthen the implementation of the population and development component. The UNFPA country technical services team in Suva, Fiji, along with national and international experts, will provide technical assistance.

RESULTS AND RESOURCES FRAMEWORK FOR PAPUA NEW GUINEA

National priorities: (a) reducing poverty; (b) addressing high population growth rate; (c) arresting the HIV/AIDS epidemic; (d) empowering women and achieving gender equality; (e) safe motherhood and better reproductive health.

Outcome of common document elaborated by the United Nations country team: (a) the Government implements governance and crisis management policies and strategies; (b) children, youth, women and men benefit from basic, high-quality health, education and social protection services; (c) rural communities in selected provinces of each region use improved and sustainable livelihood practices; (d) women and girls experience less gender inequality; and (e) the rate of HIV/AIDS infection is reduced or halted, with the Government providing services to those affected by HIV/AIDS.

Programme component	Country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Reproductive health	Outcome: Comprehensive, high-quality sexual and reproductive health information and services, including HIV/AIDS prevention services, will be available to and used by greater numbers of women, men, adolescents and youth Outcome indicators: • Unmet need for modern contraceptives reduced by 30% • Percentage of deliveries attended by skilled personnel increased by 50% • Percentage of young people aged 15-24 years reporting the use of a condom during last high-risk sexual intercourse increased by at least 20% Baseline: Health management information system; reproductive health assessment	Output 1: Increased availability of comprehensive reproductive health services, particularly family planning, emergency obstetric care, antenatal care, prevention of sexually transmitted infections and HIV/AIDS, and adolescent-friendly health services in selected districts and provincial hospitals Output indicators: • At least 50% of health centres and provincial hospitals in selected provinces provide at least three types of modern contraceptive methods, including male and female condoms • At least 50% of service delivery points in selected areas provide comprehensive emergency obstetric care and/or essential obstetric care • Proportion of births for which one or more antenatal visits occurred increased by at least 30% • Number of health facilities providing youth-friendly services increased Baseline: 2007 reproductive health assessment study; health management information system Output 2: Increased awareness and understanding among adolescents and youth of reproductive health and population issues Output indicators: • Adolescent reproductive health strategy with behaviour change communication component developed and implemented • Formal teacher training programme revised to include population and reproductive health issues • Percentage of young people aged 15-24 years with correct knowledge about HIV prevention increased by 50% Baseline: Commissioned surveys of incoming university students; pre- and post-testing on reproductive health issues of senior primary students in selected schools	Joint United Nations Programme on HIV/AIDS; United Nations Children's Fund; World Health Organization New Zealand International Aid and Development Agency (NZAID)	$6.5 million ($3 million in regular resources and $3.5 million in other resources)
National priority: effective implementation of the national population policy in support of medium-term development strategy objectives and the achievement of the national Millennium Development Goals for Papua New Guinea **Outcome of common document elaborated by the United Nations country team:** Government implements more accountable and efficient policies and strategies				
Population and development	Outcome: The three levels of Government (national, provincial and district) fully implement the national population policy, with population issues reflected in planning and monitoring documents	Output 1: Increased availability of policy-oriented and disaggregated population, gender and reproductive health data and research results for evidence-based policy formulation Output indicators: • Policy-related studies using 2006 demographic and health survey data completed and disseminated • 2010 population and housing census planned and executed • Number of districts for which disaggregated population data are available and utilized in decision-making is increased	Joint United Nations project on Millennium Development Goal monitoring National Research Institute	$3.5 million ($1.5 million in regular resources and $2 million in other resources)

Programme component	Country programme outcomes, indicators, baselines and targets	Country programme outputs, indicators, baselines and targets	Partners	Indicative resources by programme component
Population and development (continued)	Outcome indicators: • Disaggregated population data is used for policy formulation, planning and budgeting • National policies and plans, including the medium-term development strategy and the national Millennium Development Goal report, integrate and reflect priority population and gender issues	Output 2: Strengthened institutional and technical capacity of national and subnational planning units to integrate population dimensions into development frameworks and to support the implementation of population and reproductive health policies and programmes Output indicators: • Provincial population action plans are ratified and implemented in all provinces • Framework for incorporating population data and issues into district-level development plans is produced, tested and introduced in selected districts • National population policy reviewed and revised • Capacity of the National Population Council to coordinate and monitor the implementation of population, gender and reproductive health programmes strengthened • Policy recommendations issued by the National Population Council to enhance the implementation, coordination and monitoring of population and development programmes Baseline: Provincial, district and sector development plans	University of Papua New Guinea Department of National Planning and Monitoring	(see above)
National priority: gender equality and the empowerment of women are achieved (medium-term development strategy) **Outcome of common document elaborated by the United Nations country team: women and girls experience fewer gender inequalities**				
Gender	Outcome: Institutional mechanisms are strengthened to address key gender issues, with a focus on gender-based violence; gender stereotyping in schools and in the labour force; and implementation of the Convention on the Elimination of All Forms of Discrimination against Women Outcome indicators: • Incidence of gender-based violence, including domestic violence and rape, is reduced • Mechanism and facilities established to protect and support women and children suffering from violence • Balanced sex ratio in secondary and university education achieved	Output 1: Strengthened capacity of the Government and NGOs to formulate, revise and implement gender legislation, policies, programmes and action plans Output indicators: • National women's policy reviewed and revised • National programme of action to reduce sexual and gender-based violence developed and implemented • Implementation and reporting on the Convention on the Elimination of All Forms of Discrimination against Women is improved Baseline: Situation analysis, 2007 Output 2: Effective mechanisms established to address gender-based violence and gender inequality and discrimination, and to promote women's empowerment Output indicators: • Gender-based violence protocols are completed and implemented in medical facilities • Number of victims of sexual and gender-based violence receiving services, including counselling, increased • Studies on determinants of gender-based violence completed and disseminated Baseline: Situation analysis, 2007	United Nations Development Fund for Women; UNDP Civil society organizations; NGOs	$1 million ($0.5 million in regular resources and $0.5 million in other resources) Total for programme coordination and assistance: $0.5 million in regular resources